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ROLL NUMBER	

## WRITTEN TEST FOR THE POST OF TECHNICAL ASSISTANT(CARDIOLOGY) – A

DATE: 21/02/2017

TIME: 09.30 AM

**DURATION: 90 MINUTES** 

**TOTAL MARKS: 80** 

#### INSTRUCTIONS TO THE CANDIDATE

- 1. Write your Roll Number on the top of the Question Booklet and in the OMR sheet.
- Each question carries 1 mark.
- 3. There will not be any Negative Marking.
- 4. Darken only the bubble corresponding to the most appropriate answer.
- 5. Marking more than one answer will invalidate the answer
- 6. Candidate should sign in the question paper and OMR sheet.
- 7. Candidate should hand over the question paper and OMR sheet to the invigilator before leaving the examination hall.

Signature of the Candidate

1.	1. Changing from a 2 MHz to a 5 MHz	ultrasound transdi	ucer would	d generally produce:
		Reduced tissue per		
	C. Longer wavelength D.	Longer ultrasound	pulses	
2.	2. The percentage error when ultraso			20 degrees to blood column is
	A. 3 B. 7	C. 15	D. 3	30
3.	3. Which wave represents Repolariza	tion of Purkinjee F	ibres?	
	A. P wave B. QRS complex	C. T wave	D. U	J wave
4.	4. The limb sensor which placed in Le	ft 5th ICS at Anteri	or axillary	line?
	A. V1 B. V2	C. V5	D. V	76
5.	5. The 12 lead EKG is produced by ap	plication of the foll	owing to t	he patient:
	A. 12 electrodes B. 10 electrodes	C. 5 electrodes	D. 6	electrodes
6.	6. Which of the following is the best p	rotocol to use for s	icker patie	ents?
	A. Modified Bruce Protocol	B. Com	non Stress	s Test Protocol.
	C. Naughton Protocol	D. Bruce	e Protocol	
7.	7. 1MET is equivalent to			
	A. 1.5 mL O <sub>2</sub> /kg/min of body weigh	nt B. 2.5 m	ıL O <sub>2</sub> /kg/r	nin of body weight
	C. 3.5 mL O <sub>2</sub> /kg/min of body weigh	nt D. 4.5 m	$L O_2/kg/r$	nin of body weight
8.	3. Coronary Angiographic catheter all	except		
	A. Sones B. Judkins	C. Amplatz	D. 0	Cournard
9.	<ol> <li>Aortic valve area in cardiac cath lab</li> </ol>	by		
	A. Gorlin formula B. C	Continuity equation	ì	
	C. Cournards formula D. S	Strass formula		
10.	0. Device closure done in all <b>except</b>			
	A. Membranous VSD B. Ostium	primum ASD C	. PDA	D. Coronary AV fistula
	1. Tissue Doppler is a modification of			
	A. PW Doppler B. CW Dop	pler C	. CFM	D. M mode
	2. Normal LV end diastolic volume is			
	A. 50-90 ml/m2 B. 90-120	ml/m2 C. $< 30 r$	nl/m2	D. 30-50 ml/m2
	3. MV area when PHT is 110 is		-	_
	A. 1 B. 2	C. 1.5	D. 0	.5
14.	4. Sgarbossa criteria is used for			
	A. RBBB + MI B. LBBB +	MI C. RBBB		D. LBBB
	5. Mc Connell's sign on ECHO seen in		10.1	
		Constrictive pericar		
		ulmonary embolis	m	
	6. Spider view is			
		A cranial 30		
		AO 45 caudal 30		
	7. Wilkins score used in	2 15	Sales Service	
	A. MR B. MS	C. AR	D. A	S

10 Demoning during CAG	
18. Dampening during CAG	
A. Decrease in systoic pressure	
B. Absent dye reflux	
C. Waveforms like ventricular pressure tracings	
D. Inadequate opacification of coronary arteries	
19. On CAG, severe coronary stenosis is	
A. > 50 % in LAD B. > 50 % in RCA C. > 50 % in LMCA D. > 50% in LCX	
20. MVP is defined as displacement of mitral leaflets into LA during systole on ECHO by	
A. $> 1 \text{ mm}$ B. $> 2 \text{ mm}$ C. $> 3 \text{ mm}$ D. $> 4 \text{ mm}$	
21. Hemodynamically significant obstruction in FFR is	
A. < 1 B. < 0.25 C. < 0.50 D. < 0.75	
22. Very late stent thrombosis	
A. $> 30$ days B. $> 3$ months C. $> 6$ months D. $> 12$ months	
23. Spade like appearance on LV angiogram seen in	
A. MVP B. HCM C. VSR D. LV aneurysm	
24. Following are used in Percutaneous ballon mitral valvotomy, except	
A. Fogarty catheter B. Inoue balloon C. Brockenbrough needle D. Mullins s	heath
25. Watchman device used for	
A. ASD closure B. VSD closure C. LAA occlusion D. PDA closure	
26. catheter used for Left ventriculography	
A. Sones catheter B. Halo catheter C. Amplatz catheter D. Newton ca	theter
27. VSDs in left ventriculography best identified by	
A. 30 RAO view B. Pa view C. 60 LAO view D. Lateral vie	W
28. Newton catheter used for	
A. Left ventriculography B. Aortography	
C. Coronary angiography D. Carotid angiography	
29. Inoue balloon is used in	
A. Balloon aortic valvuloplasty  B. Balloon pulmonary valvuloplasty	
C. Balloon mitral valvuloplasty  D. Transcatheter Aortic Valve Replacement	
30. Contraindication for IABP	
A. Acute MR B. VSR C. Aortic dissection D. Cardiogenic shock	
31. PAH is defined as	
A. mPAP > 25 mmHg with PCWP < 15 mmHg B. mPAP < 25 mmHg with PCWP < 15 m	тЦа
C. mPAP > 25 mmHg with PCWP > 15 mmHg  D. mPAP < 25 mmHg with PCWP > 15 r	_
32. MVO2 is defined as	шппр
	110 10
A. $4 \times SVC + IVC/3$ B. $3 \times SVC + IVC/4$ C. $SVC + 3 \times IVC/4$ D. $SVC + 4 \times IVC/4$ D. $SVC $	
33. Chronotropic incompetence is determined by TMT if inability to increase heart rate to at	ieast
of age- predicted maximum	
A 85 V/A B /110/A L V/10/A L V/10/A	

34. Which is not an absolute contra in	dication of exercise te	sting
A. Acute MI less than 2 days	B. First degree AV	/ block
C. Severe symptomatic AS	D. Acute myocard	litis
35. Normal LA area in cm <sup>2</sup> is		
A. < 20 B. < 30	C. <33 D. 3	30-40
36. In normal ECG lead ii indicate volta	ge difference between	1
A. Left arm & right arm B.	Left leg & right arm	
C. Left leg & Left arm D.	Left leg & left arm plu	s right arm
37. Sokolow - Lyon voltage criteria for	LVH	
A. R in a VL more than 20 B.	R in a VL more than 13	1
C. R in a VL more than 15 D.	R in a VL more than 3!	5
38. Treatment of ventricular fibrillation	n is	
A. Atropine B. Adrenaline	C. Amiodarone	D. DC shock
39. Infero lateral segment is		
A. RCA B. LAD	C. RAMUS	D. LCX
40. Identify the false statement		
A. Presence of B notch denotes LV	dysfunction B. E	PSS is not accurate if patient has AR
C. EPSS > 15 denotes severe LV dys	function D. N	MPI < 0.5 denotes LV dysfunction
41. Trans thoracic echo is superior to the	rans oesophageal echo	o in
A. Assessing prosthetic valve funct	ion B. Assessin	ng LA clot
C. Diagnosing infective endocarditi	s D. Assessir	ng LV systolic function
42. Which is the method recommended	by American society	of echocardiography for EF
estimation		
A. Teicholz B. Quinones	C. Area length	<ul><li>D. Simpson's biplane</li></ul>
43. PISA stands for		
A. Proximal isovolumetric surface a	rea B. Proxima	l isovelocity surface area
C. Pulmonary isovolumetric surface	e area D. Proxima	l isoventricular surface area
44. Measurements in M mode is done fr	rom	
A. Leading edge to leading edge	B. Inner edge to in	iner edge
C. Outer edge to outer edge	D. Leading edge to	inner edge
45. Aortic dimension is normally maxin	num at the level of	
A. Aortic annulus B. Transao	rtic sinus C. Sino	otubular junction D. Aortic arch
46. During M mode examination of the	mitral valve leaflets, th	ne "D" point marks the valve position
A. At onset of ventricular diastole	B. During rapid fill	ling phase
C. During atrial contraction	D. At onset of vent	ricular systole
47. The following structures are seen in	PLAX view <u>except</u>	
A. Left atrium B. Left ventricle	C. Right atrium	D. Aorta
48. Pivoting or twisting of the transduc	er from a fixed positio	n on the chest wall either clockwise
or anticlockwise is called		
A. Rotation B. Angulation	C Tilting	D. Movement

49. Aortic arch is best visualized from	the following view
A. PLAX B. Subcostal	
50. SAM ( systolic anterior motion of a	anterior mitral leaflet) is seen in
A. Mitral atenosis B. HCM	C. Mitral regurgitation D. Concentric LVH
51. True about nyquistlimit (NL)	
A. NL= 2 x Pulse Repetition freque	ency B. NL= Pulse Repetition frequency
C. NL= 1/2 x Pulse Repetition frequ	ency D. NL= 4 x Pulse Repetition frequency
52. During inspiration, in tricuspid val	
	nd A waves B. There is a slight decrease in E and A waves
C. There is no change in E and A w	aves D. There is increase in E and decrease in A
53. Ejection fraction is	
A. LVEDV-LVESV/LVEDV x 100	B. LVESV-LVEDV/LVEDV x 100
C. LVEDV-LVESV/LVESV x 100	D. LVESV-LVEDV/LVESV x 100
54. In Doppler echocardiography, bloc	d flow moving towards the transducer is traditionally
displayed as	
A. White B. Red C.	Blue D. Black
55. The no. of cycles that pass a given	point per second is
A. Wavelength B. Period C.	Frequency D. Amplitude
56. In M mode, the movements of mitr	al valve anterior leaflet has
A. Z configuration B. M conf	iguration C. W configuration D. L configuration
57. M mode examination in pulmonary	stenosis shows
A. Absent or diminished 'a' wave	B. Midsystolic notching of pulmonary valve
C. Increased MAPSE	D. Prominent 'a' wave
58. "Dropout" artefacts of the interatri	al septum can be eliminated by using
A. PLAX view B. subcostal view	C. apical D. parasternal short axis
59. Crab view is	
A. Suprasternal long axis view	B. Suprasternal short axis view
C. PLAX view	D. Apical 2 chamber view
60. The "Vcut off' sign is an indicator o	
A. AV valves B. Semilunar val	ves C. Both AV and semilunar valves D. PDA
61. In severe tricuspid regurgitation, s	ystolic flow reversal is seen in
A. Pulmonary veins B. Descen	ding aorta C. Ascending aorta D. Hepatic veins
52. Nodule of Arantius is seen in	
A. Mitral Valve B. Aortic valve	C. Pulmonary valve D. Tricuspid valve
63. Loss of ultrasound as it passes thro	ough a medium is called
A. Rarefaction B. Refraction	C. Attenuation D. Reflection
A Turbulant flow ganarally acquire wil	
54. Turbulent now generally occurs wi	nen Reynold's number exceeds C. 2000 D. 4000

65	. Pulse wave is preferred to continuous	wa	ve doppler to asse	ess flow in all	except
	A. Pulmonary vein		Superior venacav		-
	C. Pulmonary valve	D.	Aortic valve		
66	For measuring LV end diastolic and en	d s	ystolic dimension	s for calculati	ng EF, M- mode is
	taken at				
	A. The mitral valve annulus	B.	The level of mitra	al valve tips	
	C. Below the papillary muscles			•	
67.	Frequency of waves used in diagnostic				
	A. 2 to 10 MHz B. 20-40 MHz			D. 200-400	MHz
68.	In the mitral inflow trace, the following	g w	ave is seen due to	atrial contra	ction
	A. E wave B. A wave	C.	C wave	D. D wave	
69.	Aortoseptal and mitral- aortic continui	ty	is best appreciated	d from	
	A. PLAX view B. Subcostal view				D. suprasternal view
70.	Normal cardiac index is (in L/min/m2)	)			•
	A. 1.2-2.4 B. 2.8-4.2	C.	4.2-6.4	D. 6.4-8.4	
71.	The volume of blood ejected during on	e c	ardiac cycle is call	ed	
	A. Cardiac output B. Cardiac ind	lex	C. Stroke vo	lume D.	Cross sectional area
72.	The first phase of ventricular diastole i	S			
	A. Isovolumic relaxation phase	В.	The rapid filling p	hase	
	C. Diastasis or slow filling phase	D.	The atrial filling p	hase	
73.	Moderator band is a part of		_		
	A. RV B. RA	C.	LV	D. LA	
74.	Near field and far field of an ultrasound	l be	eam are named re	spectively as	
	A. Fresnel and Fraunhofer zone	B.	Fraun and Hofer z	one	
	C. Doppler zone and lateral zone	D.	Snells and Rayleig	sh zone	
75.	As per the American society of echocar	dio	graphy recommen	ndations, the	end diastole
	measurements must be made from whi	ch	part of the ECG?		
	A. Onset of P wave B. Onse	et c	of QRS complex		
	C. End of QRS complex D. Onse	et c	of T wave		
76.	GAIN is a function of of receiving	si	gnals		
	A. Density B. Amplitude	C. 1	Frequency	D. Velocity	
77.	Normal LV mass index is (in g/m2)				
1	A. 30-50 B. 80-120	C. :	160-200	D. 200-240	
78.	'B notch" in the mitral M mode trace in	dic	ates ·		
1	A. Elevated LVESP B. Elevated LV	ED	P C. Reduced	LVESP	D. Reduced LVEDP
79. (	Cardiac crux is best visualized in				
1	A. PLAX B. PSAX		C. Apical 4	chamber	D. Suprasternal
30. /	A patient has a blood pressure of 130/8				-
	S				
I	A. 14 B. 24	C. 3	36	D. 48	

# TECHNICAL ASSISTANT (CARDIOLOGY)- A ANSWER KEY (21/02/2017)

		AIN	SWERKEI	(21/02	[201]		
1	В	21	D	41	D	61	D
2	В	22	D	42	D	62	В
3	D	23	В	43	В	63	С
4	С	24	A	44	A	64	C
5	В	25	<b>C</b> 7	45	В	65	D
6	C	26	В	46	A	66	В
7	C 9	27	С	47	C	67	A
8	D	28	D	48	A	68	В
9	A	29	С	49	C	69	A
10	В	30	C	50	В	70	В
11	A	31	A	51	С	71	C
12	D	32	В	52	A	72	A
13	В	33	A	53	A	73	A
14	В	34	В	54	В	74	A
15	D	35	A	55	С	75	В
16	D	36	В	56	В	76	В
17	В	37	В	57	D	77	В
18	A	38	D	58	В	78	В
19	С	39	D	59	В	79	С
20	В	40	D	60	A	80	В